# Application Data Sheet Juri 1 18 APR 2006

#### **Application Information**

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Application number::	
Filing Date::	5 /
Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	Mana
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of copies of CDs::	
Sequence submission?::	None
Computer Readable Form (CRF)?:: Number of copies of CRF::	No
Title ::	FATIGUE DEGREE MEASUREMENT DEVICE, FATIGUE DETECTION DEVICE AND COMPUTER PROGRAM TO BE USED THEREIN
Attorney Docket Number::	THE NEW
Request for Early	No
Publication?:: Request for Non- Publication?:: Suggested Drawing	No
Figure:: Total Drawing Sheets::	17
Small Entity?::	No
Latin name::	
Variety denomination name:: Petition included?::	No
Petition Type::	
Licensed US Govt. Agency:: Contract or Grant	

No

Numbers::

**Secrecy Order in Parent** 

#### **Applicant Information**

**Applicant Authority** 

Inventor

Type::

**Primary Citizenship** 

Japan

Country::

Status::

Full Capacity

Given Name::

Etsunori

Middle Name::

Family Name::

Fujita

Name Suffix::

City of Residence::

Akiku, Hiroshima-shi

State or Province of

Residence::

Japan

Country of Residence::

Street of mailing

c/o Delta Tooling Co., Ltd. 1-2-10, Yanoshinmachi

address:: City of mailing

Akiku, Hiroshima-shi

address::

State or Province of

Hiroshima

mailing address::

**Country of mailing** 

Japan

address::

Postal or Zip Code of

736-0084

mailing address::

<u>NOTE:</u> Repeat this information for each inventor or other applicant. Non-Inventor applicant information such as legal representative of a deceased inventor should follow the inventor(s) for whom the applicant is acting.

#### **Applicant Information**

**Applicant Authority** 

Inventor

Type::

**Primary Citizenship** 

Japan

Country::

Status::

Full Capacity

Given Name::

Shigehiko

Middle Name::

Family Name::

Kaneko

Name Suffix::

**City of Residence::** 

Kawaguchi-shi

State or Province of

Residence::

**Country of** 

Japan

Residence::

Street of mailing

2-7-30-809, Shibafuji

address::

City of mailing

Kawaguchi-shi

address::

**State or Province of** 

mailing address::

Saitama

Country of mailing

Japan

address::

Postal or Zip Code of

333-0854

mailing address::

### **Correspondence Information**

Correspondence Customer	054042
Number ::	

Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::
Country of mailing address::
Postal or Zip Code of mailing address::

Phone number::

(212) 986-1116

Fax Number:

(212) 986-0604

E-Mail address::

pto@wolfblock.com

## **Representative Information**

Representative Customer	054042	
Number::		

## **Domestic Priority Information**

Application ::	Continuity	Parent	Parent Filing Date::
	Type::	Application::	
This Application	National Stage of	PCT/JP04/16058	10/22/04

## **Foreign Priority Information**

Country::	Application number::	Filing Date::	Priority Claimed::
Japan	2003-363902	10/23/03	Yes

### **Assignee Information**

Assignee name::

Delta Tooling Co., Ltd.

Street of mailing

1-2-10, Yanoshinmachi

address::

City of mailing

Akiku, Hiroshima-shi

address::

State or Province of

Hiroshima

mailing address::

**Country of mailing** 

Japan

address::

Postal or Zip Code

736-0084

of mailing address::